

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER 18-977
DEFENDANT JOSEPH N. HANNA, et. al.	TYPE OF PROCESS complaint and summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

COUNTY OF LEHIGH

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

17 SOUTH SEVENTH STREET ALLENTOWN, PA 18101

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

EDWARD THOMAS KENNEDY
401 TILLAGE RD.
BREINIGSVILLE PA 18031

Number of process to be
served with this Form 285

1

Number of parties to be
served in this case

16

Check for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

SERVICE OF PROCESS TO PHILLIPS ARMSTRONG, COUNTY OF LEHIGH EXECUTIVE
17 SOUTH SEVENTH STREET, ALLENTOWN, PA 18101

FILED

JUN 13 2018

CLERK

Dep. Clerk

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

415-275-1244

DATE

2/5/18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin
No. 66

District to
Serve
No. 66

Signature of Authorized USMS Deputy or Clerk

M. Shelnish

Date

4/11/18

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date
5/25/18
Time
1:40
☐ am
☒ pm

Signature of U.S. Marshal or Deputy

USM CHA

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					\$0.00

REMARKS: BAD ADDRESS, IT DOES NOT EXIST. ENDAVOR 5/25/2018 @ 13:40

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER 18-977
DEFENDANT JOSEPH N. HANNA, et. al.	TYPE OF PROCESS complaint and summons

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
PHILLIPS ARMSTRONG, IN HIS INDIVIDUAL CAPACITY
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
17 SOUTH SEVENTH STREET ALLENTOWN, PA 18101

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW EDWARD THOMAS KENNEDY 401 TILLAGE RD. BREINIGSVILLE PA 18031	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	16
	Check for service on U.S.A.	

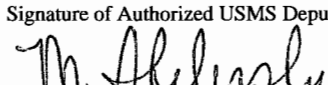
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

SERVICE OF PROCESS TO PHILLIPS ARMSTRONG, COUNTY OF LEHIGH EXECUTIVE
17 SOUTH SEVENTH STREET, ALLENTOWN, PA 18101

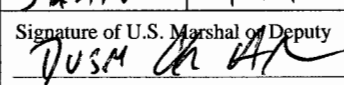
Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 415-275-1244	DATE 2/5/18
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 66	District to Serve No. 66	Signature of Authorized USMS Deputy or Clerk 	Date 4/11/18
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 5/25/18 Time 1:40 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy 

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: BAD ADDRESS, IT DOES NOT EXIST. ENJAVOR 5/25/2018 @ 1:40

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PRIOR EDITIONS MAY BE USED